

PART B - FEES(S) TRANSMITTAL

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QUALCOMM INCORPORATED
 5775 MOREHOUSE DRIVE
 SAN DIEGO, CA 92121

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Gayle Gestick	(Depositor's name)
/Gayle Gestick/	(Signature)
March 6, 2007	(Date)

APPLICATION NO.	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/930,763

08/15/2001

Francesco Grilli

PA510B2B1

2384

TITLE OF INVENTION:

METHOD AND SYSTEM FOR PERFORMING HANDOFF IN WIRELESS COMMUNICATION SYSTEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	REV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	03/06/2007

EXAMINER	AIR UNIT	CLASS-SUBCLASS
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SAM, PHIRIN

2B16

370-331900

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address for Change of Correspondence Address form PTO/SB/122 attached.

☐ "Fee Address" indication for "Fee Address" indication form PTO/SB/47, Rev 03-02 (or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- | | |
|--|----------------------|
| (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | 1. Thomas R. Rouse |
| (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. | 2. Thien Nguyen |
| | 3. S. Hossain Beladi |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

QUALCOMM INCORPORATED

SAN DIEGO, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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- ☐ A check is enclosed.
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _____, 37,0026 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature: /George J. Gehring/

Date: March 6, 2007

Typed or printed name: George J. Gehring

Registration No. 40,471

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